

**10/559387**

**IAP16 Rec'd PCT/PTO 06 DEC 2005**

**Application Data Sheet**

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: ABSOLUTE ANGULAR POSITION  
SENSOR ON 360° OF A ROTATING  
ELEMENT  
Attorney Docket Number:: 0563-1063  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: NETHERLANDS  
Status:: Full Capacity  
Given Name:: WILLEM  
Middle Name::  
Family Name:: TEULINGS  
Name Suffix::  
City of Residence:: FONTENILLES  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 3, LOTISSEMENT PRE AUX CHENES  
Address::  
City of Mailing Address:: FONTENILLES  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-31470

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: NETHERLANDS  
Status:: Full Capacity  
Given Name:: JEROEN  
Middle Name::  
Family Name:: VAN-EST  
Name Suffix::  
City of Residence:: RAMONVILLE-SAINT-AGNE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 7, LES FLORALIES - APPT. 154  
Address::  
City of Mailing Address:: RAMONVILLE-SAINT-AGNE

State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-31520

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/005137	5/13/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03/06826	6/6/03	Yes

**Assignment Information**

Assignee Name::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::